

# **Madison County Community Health Council**

## **Community Needs Assessment**



**1998**

### **Volume I**

**A report on the county's health status and strategies  
developed by the community**

Community Development  
Tennessee Department of Health  
295 Summar Avenue  
Jackson, TN

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# INTRODUCTION

## Mission Statement

***The Mission of the Community Health Council is to determine the health needs of the community and develop a plan of action for improving the health status of people in Madison County, Tennessee.***

## COUNTY DESCRIPTION

### Land Area

Madison County is located in the heart of West Tennessee. Jackson, the County seat, is in the center of the county 85 miles east of Memphis and 130 miles west of Nashville. Jackson was named in honor of war hero and future U.S. President Andrew Jackson and is known as the home of America's most legendary railroad man, Casey Jones.

Railroads have been an important part of Jackson's growth. At one time five railroad presidents lived in the community. Today, Jackson has emerged as a regional "hub" for West Tennessee. The city's location and outstanding area roads have contributed to an expansion of the local economy which was once dependent on agriculture.

## ECONOMIC BASE

A reliable workforce, excellent quality of life, and outstanding industrial support services have led to an extended period of economic growth in Madison County. Primary employers in the community include Porter-Cable (power tools), West Tennessee Health Care, Jackson-Madison County School Board, Procter and Gamble (Pringles), and Murray Inc. (mowers). Madison County industries provide jobs for residents of all of West Tennessee.

Healthcare is an important industry to Jackson and Madison County. The community offers the only tertiary care centers in West Tennessee outside of Shelby County. Medical specialty and subspecialty care of all types is available. More than thirty percent of Madison County residents work in a service industry – primarily healthcare.

Tourism and recreation are fast becoming leading industries in the community. Twelve parks, encompassing over 800 acres, are operated by the Jackson Recreation and Parks Department. Jackson is also home to the West Tennessee Diamond Jaxx, a Class AA baseball team that led the Southern League in attendance in 1998.

# Demographics of Madison County

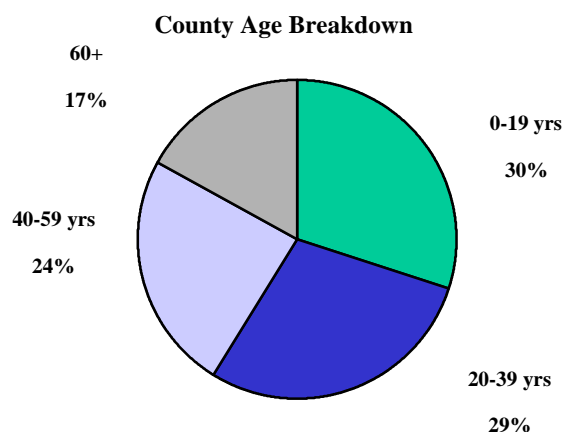
## ***MEDICAL COMMUNITY***

Madison County is home to two full-service hospitals – Jackson-Madison County General Hospital and Methodist LeBonheur Hospital are full-service not-for-profit tertiary care facilities offering a wide range of services on both an inpatient and outpatient basis. Some of the available services include: Ambulatory Surgery, CAT Scan, Nuclear Medicine, 24 Hour Cardiac Monitoring, Cardiac Stress Testing, Cardiology, Pathology, Home Health, and Hospice. Virtually all types of specialty and subspecialty care are available in the community.

The expanded medical community offers general and family practitioners, dental and orthodontic services, optometrists and opticians. Pathways, Inc. offers a variety of services from early childhood intervention to stress management. There are a number of intermediate care facilities to meet the nursing home needs of the area. Home health services are also available to those in need of special treatment.

The Madison County Health Department offers a wide range of services including family planning, prenatal care, WIC, nutritional counseling, child immunizations, adolescent dentistry, Resource Mothers, Childrens' Special Services, STD testing, adolescent pregnancy prevention programs, and health education services.

## ***DEMOGRAPHICS***



## **POPULATION CATEGORY**

### **MADISON COUNTY**

<b>SEX</b>	<b>NUMBER</b>	<b>%</b>	<b>TN PERCENT</b>
FEMALE	45,139	53	52
Male	39,656	47	48
<b>Race</b>			
White	57,416	68	83
Black	26,941	32	16
Other	438	-	-

# DEMOGRAPHICS OF MADISON COUNTY

## HOUSEHOLDS

Total Number of Households: 26,609

	County	Region	State
Percent of households that are family households	72.0	74.7	72.7
Percent of households that are families headed by a female with no husband present	15.8	11.8	12.6
Percent of households that are families headed by a female with no husband present and with children under 18 years	9.4	6.4	6.9
Percent of households with the householder 65 and up	20.0	27.5	21.8

## EDUCATION

	County	Region	State
Number of persons age 25 and older	43,068	294,457	3,139,066
Number of persons 25 and up that are high school graduates or higher	68.3	56.5	67.1
Percent of persons 25 and up with a Bachelor's degree or higher	16.6	7.6	16.0

# DEMOGRAPHICS OF MADISON COUNTY

## EMPLOYMENT

	County	Region	State
Number of Persons 16 and Older	56,036	352,668	3,799,725
Percent In Work Force	60.1	59.6	64.0
Number of Persons 16 and Older in Civilian Work Force	33,629	209,376	2,405,077
Percent Unemployed	5.0	7.4	6.4
Number of Females 16 Years and Older with Own Children Under 6	1,694	26,205	287,675
Percent in Labor Force	59.0	64.9	62.9

## POVERTY STATUS

	County	Region	State
Per capita income in 1989	\$11,655	\$9,850	\$12,255
Percent of persons below the 1989 poverty level	17.7	19.0	15.7
Families with children under 18 years, percent with income in 1989 below poverty level	23.7	23.8	20.7
Percent of persons age 65 years and older with income in 1989 below poverty	21.1	27.4	20.9

Sources: U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population General Population Characteristics, Tennessee, and 1990 Census of Population and Housing, Summary Social, Economic, and Housing Characteristics Tennessee.

# COMMUNITY NEEDS ASSESSMENT

## HISTORY OF THE PROCESS

In 1996 local health care providers and community leaders in Madison County began an on-going dialogue about the challenges facing the community's health care delivery system. It was becoming apparent that the pressures of reform including changes in Medicaid, AFDC, and reimbursement rates for rural hospitals were beginning to strain the community's limited resources. Local leaders responded by forming a Community Health Council to serve as a mechanism for evaluating the health status of the community and pooling resources to address shared problems. The Health Council conducted a comprehensive assessment of the health status of Madison County residents and developed a strategy to address the needs identified.

### COMMUNITY DIAGNOSIS

The "Community Diagnosis" process developed by the Tennessee Department of Health was the basis for the assessment. Community Diagnosis is a data-driven assessment process which helps communities identify and prioritize health problems.

Information regarding the community's health status, in addition to data available from the State, was collected and analyzed.

Data from a behavioral risk factor survey conducted by the University of Tennessee was also reviewed. Secondary data available from the Department of Health and other sources were then studied in order to focus discussion. Once a comprehensive list of problems had been compiled, the problems were prioritized based on size, seriousness, and effectiveness of interventions. Using this approach a Community Health Problems List was developed. Once this list had been compiled, work groups were developed to begin developing specific goals and designing appropriate interventions.

***"Health Departments across the county have not developed good assessment capabilities, but we must concentrate on this function if we are to enter the 21<sup>st</sup> century with the data and system to recognize health problems as well as resolve them."***

***Fredia Wadley, Commissioner  
Tennessee Department of Health  
February 1995***

# COMMUNITY NEEDS ASSESSMENT

## **COUNCIL MAKE-UP**

The Madison County Community Health Council consists of a diverse group of community leaders which is representative of the community in terms of geography, race, profession, and institutional factors. A list of council representatives is attached as Appendix A.

## **DATA GATHERED**

### ***Demographic and Socioeconomic Data***

Population Demographics  
Life Cycle of Residents  
Labor Force Status  
Marital Status  
Poverty Status  
Family/Household Status

### ***Health Professionals Data***

Primary Care Physicians  
OB/GYN Physicians  
Internists  
Pediatricians  
Specialists  
Dentists  
Nurse Practitioners/Nurse  
Midwives

### ***TennCare Data***

Number of Enrollees  
Managed Care Organizations  
Number of Providers by MCO

## ***Health and Vital Statistics Data***

Fertility Data  
Cancer  
Adolescent Pregnancy Rates  
Diabetes  
Live Births by Age and Race  
Heart Conditions  
Birthweight Trends  
Hypertension  
Infant Deaths by Race  
HIV/Aids  
Leading Causes of Death  
Stress  
Mothers Exhibiting Maternal Risk Factors  
Tobacco Use  
Motor Vehicle Mortality  
Hospital Discharge Data  
Accidental Death Mortality  
Violent Deaths  
Sexually Transmitted Diseases  
Obesity

### ***Family Data***

Domestic Violence Patterns  
Child Abuse and Neglect  
Alcohol and Drug Abuse

# COMMUNITY NEEDS ASSESSMENT

## ***Community Health Surveys***

The Council supplemented published data by reviewing survey data regarding behavioral risk factor conducted by the University of Tennessee. Focus groups were also conducted to gather input and identify anecdotal data to support the assessment process.

## **Community Health Concerns Identified**

- ♦ Cancer
- ♦ Obesity
- ♦ Child Abuse Neglect
- ♦ Heart Disease
- ♦ Hypertension
- ♦ Diabetes
- ♦ Lack of Resources
- ♦ Indigent Dental & Eye Care
- ♦ Motor Vehicle Crashes

## ***PRIORITIZED PROBLEMS***

The Council discussed an increasing range of pressing health problems that the community must address with limited resources. To direct those resources well, the Council established priorities from among the problems identified. For this task the Council chose a modification of the method developed by J.J. Hanlon who is a nationally known public health professional. This method sets priorities on the basis of the size and seriousness of the problem in conjunction with knowledge about the effectiveness of potentially available interventions. Each problem being considered was given a numerical score on a scale of 0 to 10 based on the size of the population affected, the seriousness of the problem and the effectiveness of potential interventions. The following formula was used for the calculation of total scores (D) where A = Size; B = Seriousness, and C = Effectiveness of Interventions,

$$D = A + (2B) \times C$$

# COMMUNITY NEEDS ASSESSMENT

## **Community Health Priorities 1996-97**

**Exercise/Obesity  
Child Abuse and Neglect  
Cancer**

**Heart Disease/Diabetes  
Lack of Financial Resources**

The Community Health Council selected five problems from the list of health concerns to be addressed during the first project year. These community health priorities were adolescent pregnancy and motor vehicle crashes. When selecting these priorities for 1996-97, the Council worked through the entire sequence of interacting factors that contribute to each community health problem identified. Links between problems, barriers to effective intervention and the availability of resources were all-important considerations.

### **Community Resources**

- ◆ University of Tennessee Extension Services
  - ◆ API Council
  - ◆ March of Dimes
  - ◆ Resource Mothers
  - ◆ CHAD
  - ◆ West Tennessee Health Care
  - ◆ Methodist-LeBonheur Health Care
  - ◆ American Heart Association
  - ◆ American Diabetes Association
  - ◆ Regional Inter-Faith Association
  - ◆ Area Agency on Aging
  - ◆ SW Council on Children and Youth
  - ◆ Exchange Club-Carl Perkins Ctr.
  - ◆ STAR Center
  - ◆ Boys and Girls Club of Jackson
  - ◆ YMCA
  - ◆ Lambuth University
  - ◆ Union University
  - ◆ Jackson State Community College
  - ◆ University of Memphis
  - ◆ Civic Clubs
  - ◆ March of Dimes
  - ◆ Southwest Human Resources Agency
  - ◆ TN Department of Human Services
  - ◆ American Red Cross
  - ◆ Aspell Manor
  - ◆ JACOA
  - ◆ West Tennessee Legal Services
  - ◆ WRAP
  - ◆ Southwest Community Services Agency
- ◆ Local Physicians
  - ◆ Madison County Health Dept.
  - ◆ Regional Health Department
  - ◆ Schools
  - ◆ TN Department of Children's Services
  - ◆ Churches
  - ◆ Madison County Juvenile Court
  - ◆ Pathways, Inc.

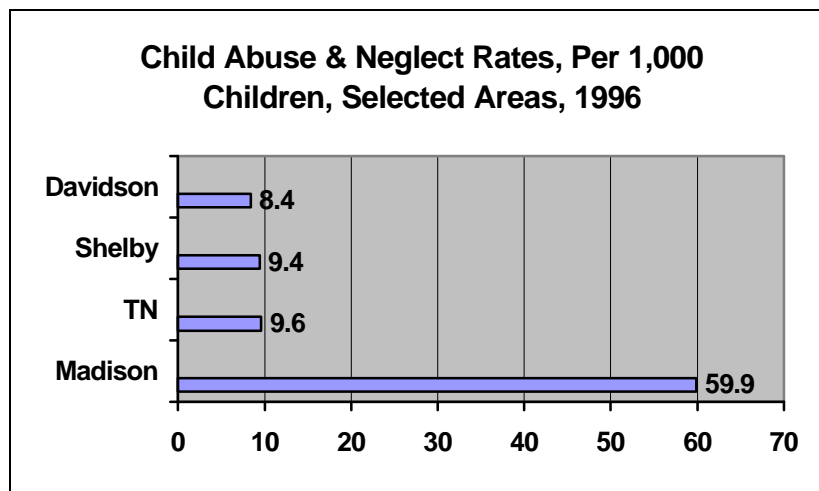
# COMMUNITY NEEDS ASSESSMENT

## ***EXERCISE/OBESITY***

The Council believes that too many community residents practice sedentary lifestyles that contribute to obesity and its related health problems. Nationally, it is estimated that 14 percent of children aged 6 to 11; 12 percent of adolescents aged 12 to 17; and 35 percent of adults aged 20 and over are overweight. In a behavioral risk factor survey conducted by the University of Tennessee, more than half of the respondents described obesity as a problem in the community. An additional 16 percent of respondents reported having been told by a physician to lose weight.

## **CHILD ABUSE AND NEGLECT**

According to *KIDS COUNT*, the indicated child abuse and neglect rate for Madison County increased nearly 600 percent from 1992 to 1996 from a rate of 8.7 per 1,000 children to a rate of 59.9. During the same time, the rate of children in state care increased by over 600 percent from a rate of 8.3 to a rate of 58.6. The percent of children under 18 referred to Juvenile Court has also increased dramatically from 2.7 percent in 1992 to 13.9 percent in 1996.



# COMMUNITY NEEDS ASSESSMENT

## **CANCER**

According to the American Cancer Society, 1.7 percent of the population or about 1,400 residents of Madison County receive medical care for cancer each year. In 1997, 188 county residents lost their battle with cancer. Cancer is the second leading cause of death in Madison County. Approximately 420 new cancer cases are diagnosed each year in the community. In a community survey, 65 percent of respondents described cancer as a community health problem.

## **HEART DISEASE AND DIABETES**

Heart Disease is the leading cause of death in Madison County accounting for 204 deaths in 1997. In a behavioral risk factor survey conducted by the University of Tennessee, 59 percent of respondents described heart disease as a community health problem. 67 percent of respondents described high blood pressure as a community health problem.

Diabetes plays a major role in heart disease and other health issues such as blindness, kidney disease, amputations and stroke. The American Diabetes Association estimates that 5.4 percent of the population or 4,579 Madison County residents has diabetes. In a behavioral risk factor survey conducted in the community, four percent of respondents reported that they had been diagnosed as diabetic. Forty-four percent of respondents described diabetes as a community health problem.

## **LACK OF FINANCIAL RESOURCES**

Despite tremendous economic growth in the past twenty years, there are too many Madison County residents who lack the resources required to access the health care system. There is also a significant number of individuals in the community who do not understand how to access the services which are available. Prescription drug costs are a financial burden for many residents – especially seniors. Dental and vision care are often considered luxuries by the working poor.

## ***Actions and Strategies***

***Subcommittees were formed to serve as working groups for each priority identified and were expanded to include individuals with knowledge and experience related to each problem. Each subcommittee was charged with the responsibility of developing a plan of action which included objectives, activities and evaluation criteria. Volume II of this report will include those findings and recommendations.***

**Madison County  
Community Health Council**

***Dr. Paul Clayton  
First United Methodist Church***

***Eddie Hays, Principal  
Parkway Middle School***

***Ron Pennel  
Lambuth University***

***Mary Tyler, Director  
Area Relief Ministries***

***Kim Nolen  
Jackson Madison Co. General  
Hospital***

***Marla McCormick  
YMCA***

***Mona Canovan  
St. Mary's Manor***

***Pam Nash, Director  
Exchange Club/Carl Perkins  
Center***

***Tony Emison, Director  
Madison Co. Health Dept.***

***Shirlene Mercer  
Jackson Madison Co. General  
Hospital***

***Nick Pappas, Director  
Youth Town of Tennessee***

***Jeff Frieling  
Jackson Madison Co. General  
Hospital***

***Deena Kail  
Jackson Madison Co. General  
Hospital***

***Joan Nowell  
Jackson Madison Co. General  
Hospital***

***Dale Brittain  
Kiwanis Center for Child  
Development***